PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000 Application or Docket Number 423 90 / 1/70 \$												
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE (OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			30				1	RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMB	ER EXTRA	I	Basic Fee	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			20 minus 20=		•	10		X\$ 9=		OR	X\$18=	180
INDEPENDENT CLAIMS			3 minus 3 =		•	#		X40=		OR	X80=	-
MUI	TIPLE DEPEN	DENT CLAIM PF	RESENT				•	+135=		OR	.+270=	_
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL		OR	TOTAL	
CLAIMS AS AMENDED - PART II 10-7-05 (Column 1) (Column 2) (Column 3)								SMALL E	ENTITY	OR	OTHER SMALL E	
AMENDMENT A		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	EST BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 27	Minus	ى	0	= -		X\$ 9=		OR	X\$18=	·
	Independent	. 3	Minus	••• \	3	=		X40=		OR	X80=	
٢	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						j	+135=		OR	+270=	
								TOTAL			· YOTAL	
ADDIT. FEE COlumn 1) (Column 2) (Column 3)												
AMENOMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUI PREV	HEST MBER IOUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	*		±		X\$ 9=		OR	X\$18=	
	Independent	•	Minus	***		=	1	X40=		OR	X80=	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						j	+135=		OR	+270=	
								TOTAL ADDIT, FEE		OR	ADDIT. FEE	
		(Column 1).			ımn 2)	(Column 3)			_		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUI PREV	HEST MBER HOUSLY D FOR	PRESENT		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	• .	Minus	••		5		X\$ 9=		OR	X\$18=	ï
	Independent		Minus			-	1	X40=		OR	X80=	
الم	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=		OR	070	
If the entry in column 1 is less than the entry in column 2, write "0" in column 3. TOTAL If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20. ADDIT. FEE											TOTAL ADDIT FEE	
If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE												

FORM PTO-275 (Rev. 8/00)